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1. (Corporation) 2. (Corporation) 3. (Corporation)	n Name)	(Document #)	95 FEB - 7 PH V. 05 SECRETARY OF TALLAHASSES A
4. (Corporatio	n Name)	(Document #)	
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NEW FILINGS	AMENDMENTS		
Profit	Amendment	No. of the Control of	
NonProfit	Resignation of R.A., Officer,		
Limited Liability	Change of Registered Agent	- O9	5A.5>8C1
Domestication	ssolution/Withdrawal	······	3 70 0
Other	Merger		•
OTHER FILINGS Annual Report	REGISTRATION/ QVALIFICATION	7-9	1-95
Fictitious Name	Foreign		\ <u></u>
Name Reservation	Limited Partnership	(72	>)
	Reinstatement		\mathcal{J}
Γ	Trademark		
	Other	Examir	ner's Initials

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE | NAME

The name of the corporation shall be:

JLG MEDICAL TRANSCRIPTION, INC.

95 FEB -7 PA 12: 05
SECRETARY OF STATE
TALLAHASSEE. FLORID

ARTICLE'II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

5364 Ehrlich Road Suite 109 Tampa, FL 33625

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 @ \$ 1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Jeffory Lee Gay 5364 Ehrlich Road Suite 109 Tampa, FL 33625

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Jeffory Lee Gay 5364 Ehrlich Road Suite 109 Tampa, FL 33625

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLUBIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN OF SIGNING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OFFICE/REGISTERED AGENT.			
1. The name of the corporation is: JLG MEDICAL TRANSCRIPTION, INC.			
13			
,			
2. The name and address of the registered agent and office is:			
4			
Jeffory Lee Gay			
(Name)			
5364 Ehrlich Road Suite 109			
(P.O. Box not acceptable)			
(City/State/Zip)			

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of ray duties, and I am familiar with and accept the obligations of my position as registered agent.

(Skinature)